

CITY OF EUREKA 531 K Street Eureka, CA 95501-1165

APPLICATION FOR SENIOR CITIZEN REDUCED SEWER RATE

NAME:		
ADDRESS:		
DATE OF BIR	TH:	
	Birth verification (check applicable box)	
©	Driver's License	
©	Birth Certificate	
©	Baptismal Certificate	
©	Other	
I hereby certify that I reside at the above address and being 65 or older hereby make application for the reduced sewer rate available.		
Signature:		
Date:	Account No.:	